

City of Fremont Building and Safety Division 39550 Liberty St. Fremont CA 94538 510-494-4400

APPLICATION FOR RECOGNITION AS A THIRD-PARTY FIELD EVALUATION BODY (FEB)

Please check one of the following:

Application for Evaluation to be Included on City of Fremont Approved FEB List

\$358.80 Application/Review fee
(annual renewal fee of \$179.80 required with updated application)

Application for Single Evaluation

\$179.40 Application/Review fee

Corporation or Company Information

Legal Name:

Mailing Address (for main office)

City: _____ State: ____ ZIP: ____ County:

Street Address (if different from mailing address)

City: _____ State: ____ ZIP: ____ County:

City of Fremont Business License Number _____

Corporation or Company Legal Entity Information

Provide a certified copy of Registration, or other appropriate document, with a State or Province as a legal sole proprietorship, partnership, corporation, or LLC. Organizations having only a registration of a "fictitious business name" or no other documentation as a business entity are not considered legally identifiable.

Attach separate documentation showing legal status in the form of the company's Articles of Incorporation or Registration, as registered with the State or Province in which the company is operating. Provide the names, titles, and business affiliations of principal officers affiliated with the FEB.

Corporation or Company Organization

Submit on a separate page the FEB Organizational Chart showing the organizational elements involved, key positions, relationships between components from the chief executive officer, or equivalent, to the project-handling individuals. Provide the names and titles of specific key individuals, including Technical Manager, Operations Manager, and any other supervisory personnel directly related to Field Evaluation operations.

Last Name:	Title:		
Business Affiliation(s)			
	ufacturers, suppliers, distributors, or installers pages as necessary).		
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FEB Personnel

On separate sheets provide the following;

- Educational background, training experience, professional licenses, registrations or certificates, and other applicable qualifications for each of the following key personnel: Technical Manager, direct Supervisor of FEB operations, and individual(s) managing the management system defined in Section 5.5 of NFPA 790.
- 2. Provide the minimum competency for personnel completing Field Evaluation projects, including educational background, experience, training, and professional registration.
- 3. Provide a complete description of the training program and the auditing process to ensure continued accuracy, validity, and uniformity for performing evaluations.
- 4. Provide records, including dates of the observation or examination, of the performance or personnel performing evaluations.
- 5. Indicate any involvement the FEB will have in the design, promotion, or sale of the products being tested; engineering of projects where equipment could be specified; and contracting of any project where the project could be used. Provide a copy on policy for limiting conflict of interest in the evaluation of products per 5.2.6 of NFPA 790.

Products Requested for Recognition

Please attach a separate sheet with the specific types of products your company wishes to evaluate and the PRIMARY standard (usually from UL or FM) for that type of equipment. Example: The primary standard for laboratory equipment is either UL 6101A or UL1262. Referencing NFPA 70 or 79 is not a primary standard for any type of equipment but may be used as a secondary standard when conducting an evaluation. Reference NFPA 791 4.3.2*.

In addition to the types of equipment and standards please provide information on how expertise in a standard is demonstrated.

Management System

Submit a copy of the FEB management system manual as described in 5.5.2 of NFPA 790

Procedures and Test Equipment

On a separate sheet please provide the following;

- 1. Submit documentation on the procedures and practices the FEB utilizes to complete Field Evaluations. This is to be in the form of the detailed process to be followed; references only to standards or practices is not acceptable (attach separate pages as needed). Procedures shall comply with chapters four through eight of NFPA 791.
- Provide an inventory list of test and measurement equipment used for evaluations and include the calibration schedule; see Chapter 13 of NFPA 790. Provide calibration reports on all test and measurement equipment used for evaluations for the past 5 years or, for companies with less than 5 years of records, since the beginning of operations.
- 3. Submit calibration procedures for test and measurement equipment used for evaluations when in-house calibration is used. Submit name(s) of outside calibration laboratories used for calibrating equipment used for evaluations and provide a copy of accreditation for such equipment. Outside calibration laboratories are accredited by the following third-party organizations: National Voluntary Laboratory Accreditation Program (NVLAP), American Association for Laboratory Accreditation (A2LA), or equivalent.
- 4. Where an outside calibration organization is not accredited by NVLAP, A2LA, or equivalent for the test and measurement equipment they are contracted to calibrate, provide the FEB's audit procedures to ensure that the procedures of the outside calibration organization meet minimum requirements for test and measurement equipment calibration and traceability to recognized national or international standards.

Records

On a separate sheet please describe the key records that are maintained and the retention period, including a minimum; inspection, testing, and evaluation data sheets; evaluation reports; test and measurement calibration records; personnel qualifications; and training records.

Sample Report

Provide one sample evaluation report of the type the FEB produces or intends to produce. The sample report should contain the element as identified in NFPA 791, Recommended Practice and Procedures for Unlabeled Electrical Equipment Evaluation.

Authorized Representative

The following information is for identifying the authorized representative for contacting and coordinating the recognition.

First name:	Last name:	Title :
Phone :	Fax :	E-mail:
	City of Fremont Use (Only
		FEB #
Approved		
Building Official		Date
Approved status will remain in renewal fees are due annually	•	approval date. Updated applications and d FEB list.
Disapproved		Date
Justification		